Contact the Elderly

“Before I joined Contact, the only way I could mark the difference between a weekday and the weekend was to sit in a chair in the week and move to my sofa on a Sunday” (Mary 91)

Responses to the specific questions posed in the ‘Call for Views’.

1. Prevalence of social isolation in urban and rural settings
Social isolation is prevalent in both urban and rural settings, leaving older people in those communities without support or social contact. The triggers of social isolation such as bereavement or loss of mobility may be common but the factors which exacerbate the feeling of isolation are different.

Older people living alone in rural areas who can no longer drive, or be driven by a family member, may be at a disproportionate disadvantage. The collapse of local infrastructure, such as regular bus services and the closure of pubs, shops and post offices, severely limits the daily social contact opportunities for older people in isolated villages. In some rural areas there may be cases of older people having bought retirement homes in a country area, but when one of them dies the remaining partner is left quite alone, often with no family nearby.

In urban areas, whilst the infrastructure and transportation may not be as difficult, social isolation among the older people can be as prevalent, due to lack of mobility and ill health.
All in all, social isolation is of universal prevalence.

In Contact the Elderly’s 2014 monitoring survey, 77% of 1,286 guests who returned the survey said they feel lonelier now than when they were younger, 61% said Sunday is the loneliest day of the week. The top reason given by people for becoming a guest of Contact the Elderly was loneliness, with 55% of respondents giving this reason, and 51% of respondents mentioned the problem of mobility issues that restricted them going out.

2. Impacts of social isolation
Loneliness and social isolation are harmful to health. Research shows that lacking social connections is as damaging to health as smoking 15 cigarettes a day.
Loneliness increases the risk of high blood pressure, the onset of disability and puts individuals at a greater risk of cognitive decline and dementia. The link between loneliness and depression is well documented.

3. **Best practice and ideas that could be shared**

Recent Health and Social Care initiatives in Scotland in terms of older people have tended to focus on those who are very frail/ill; not coping at home and with no family support; ‘bed blocking’ in acute hospitals.

People who remain in their own homes, or in sheltered accommodation and who are seen to be ‘coping’ do not seem to have been given any priority. There are many ‘hard to find’ lonely older people – people who do not want to demonstrate what they perceive as a weakness, i.e. loneliness. Agencies and services in local areas need to network widely to reach such people - statutory and voluntary services need to respect and trust each other and work together.

Throughout Scotland there exists a wide range of services targeted at older people. Understandably these services tend to be local, rooted in local communities and with a high prevalence of volunteer involvement. Older people themselves are often volunteers and this should be encouraged – recent research has shown that volunteering by older people really does add years to life.

There is no single ‘solution’. Older people are individuals, not a homogeneous group; therefore a range of services is required. And indeed a wide range of services/initiatives does already exist. However these services have grown organically and there is a wide variation of available services. Existing agencies should be encouraged to share ideas and cross refer to each other.

**A model that can be replicated across Scotland**

**Contact the Elderly**

Contact the Elderly relieves the acute isolation and loneliness suffered by people aged 75 and over, who live alone with limited contact from family, friends or statutory services, by organising Sunday afternoon tea parties which bring together all sections of society for a purely social occasion and provide a regular and vital friendship link.

One Sunday afternoon a month, volunteers use their cars to collect older people (known as guests) from their homes and take them to volunteer hosts’ homes, where everyone enjoys spending time together chatting over a home-made tea. Each group is warmly welcomed by a different host each month, but the drivers remain the same,
which means that over the months and years, acquaintances turn into friends and loneliness is replaced by companionship.

The groups:-

• take place on a Sunday afternoon when few services are available; a day traditionally remembered by the older generation as a family day, and now thought of by many as the loneliest day of the week

• provide a rare alternative to the institutional care usually available to people over 75 and are not aimed at people suffering from a specific health condition

• are kept small (usually 6-8 older people and 3-4 volunteer drivers) so they remain friendly and everybody can join in and have fun. This is especially important for people who don’t hear / see well or who have lost confidence or social skills

• include older people and volunteers from all backgrounds.

The volunteers are of all ages...including some older people. Recent research has demonstrated that volunteering in itself can add years to life.

As well as the intrinsic enjoyment of going out, meeting new and old friends and enjoying some delicious home baking, a series of friendship connections is created between the older people themselves and between the older people and the volunteers. Relationships between volunteers and guests that develop beyond the regular monthly outings, provide a support network and facilitate additional, informal monitoring of the older persons welfare.

Contact the Elderly guests are the best advocates:-

“I feel I’ve come out of a dark tunnel into the light. Before I joined Contact I thought my life had ended, now it’s started again.” (Edith 85)

“I look forward immensely to the monthly tea party as Sundays are very lonely times” (David 89)

Contact the Elderly was founded 50 years ago and has 86 small groups in Scotland. The charity has an Executive Officer in Scotland and 4 part-time local Development Officers. All the staff are home based. The charity is mainly funded by charitable and trust fund donations but also receives a small grant from Scottish Government.

In addition to the small tea parties in volunteers’ homes, Contact the Elderly also organises occasional bigger events e.g. the Lord Provost’s tea party for all the 9 groups in Edinburgh. Local groups are coordinated by volunteer coordinators. With some support Contact the Elderly groups usually continue to flourish for at least 15 years, (some have existed for 45 years) providing a long-term, low-cost solution to the loneliness and isolation suffered by very much older people in our communities.
In the Highlands, there is more a preponderance of Friendship Groups, which meet in a local hall but still with an important input from volunteers.

4. Potential ideas for improvement and influencing policy

At individual level - people need to prepare for old age.
At service level - consideration should be given to supporting services which enable older people to remain independent, active and engaged in their local communities.
At policy level -
Even in extreme old age people remain individuals and no one size fits all. A range of services and interventions is required.

Scottish Government (and other funders) should recognise that funding “innovations” is not always the most effective approach. Often, financial support to enable existing well tested services to grow can prove to be more beneficial.

Services which involve volunteers should be encouraged. Volunteers offer links to an additional tranche of local supports and connections.

There should be encouragement between providers in any one area to cross refer potential service users to each other.

5. Effective awareness raising within communities

This is a major issue and all available tools need to be used – local press; local churches; commercial sector e.g. Bingo, cinemas; local Third Sector Interfaces; encourage Health and Social Care bodies to trust and work with local groups and charities.

Could local databases of provision be created, which GPs could check for local info? Older people are frequent visitors to GPs who, in the main, they trust. ‘One in 10 patients visit their GP due to loneliness.’ (The Campaign to End Loneliness.) Can a referral tool be developed that GPs can use?

6. A range of ‘solutions’ is required – not one single approach.
Contact the Elderly is just one of many providers who could benefit from a better funded, collaborative and partnership approach.

“I’m really looking forward to going to the tea next Sunday. I haven’t been out for 7 weeks. I’m really looking forward to meeting people. I spend so much time alone and this will be a lovely change” (Elsie 94)
Valerie Crookston,
Scotland Executive Officer, Contact the Elderly
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